

TRANSMITTAL FORM

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Total Number of Pages in This Submission **2**

Application Number	09/903,412
Filing Date	July 11, 2001
First Named Inventor	Shohel Kolde
Art Unit	1639
Examiner Name	Teresa D. Wessendorf
Attorney Docket Number	17027.003US1

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Notification of Loss of Entitlement to Small Entity Status (1 pg)
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	VIKSINIS HARRIS & PADYS PLLP		
Signature			
Printed name	Peter L. Malen		
Date	September <u>24</u> , 2007	Reg. No.	44,894

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Lynda Mau	Date	September <u>24</u> , 2007

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S/N 09/903,412

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Shohei Koide	Examiner:	Teresa D. Wessendorf
Serial No.:	09/903,412	Group Art Unit:	1639
Filed:	July 11, 2001	Docket:	17027.003US1
Title:	ARTIFICIAL ANTIBODY POLYPEPTIDES		

NOTIFICATION OF LOSS OF ENTITLEMENT TO SMALL ENTITY STATUS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Notification is hereby provided that this patent application is no longer entitled to small entity status.

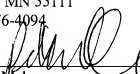
Please contact the Applicant's Representative at the below-listed telephone number if there are any questions regarding this communication. If necessary, please charge any fees or credit overpayment to Deposit Account No. 50-3503.

Respectfully submitted,
Shohei Koide
By his Representatives,
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Date

September 24, 2007

By


Peter L. Malen
Reg. No. 44,894

CERTIFICATE UNDER 37 C.F.R. 1.8: I hereby certify that this correspondence is being transmitted to the United States Patent and Trademark Office on this 24 day of September, 2007.

Name

Lynda Mau

Signature

Lynda Mau